## SCHEDULE A (FEC Form 3X)

| Use separate schedule(s) for each category of the Detailed Summary Page  | F  | FOR LINE NUMBER: |     |  |     |  |     | 1 | 17 | OF |  | 27 |
|--|----|------------------|-----|--|-----|--|-----|---|----|----|--|----|
|  | (c | (check only one) |     |  |     |  |     |   |    |    |  |    |
|  |    | X                | 11a |  | 11b |  | 11c |   | 12 |    |  |    |
|  |    |                  | 13  |  | 14  |  | 15  |   | 16 |    |  | 17 |
| not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee. |    |                  |     |  |     |  |     |   |    |    |  |    |

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Soares De Sa, Gustavo, , , Date of Receipt Mailing Address 295 3rd St 2018 Apt 5 City State Zip Code Transaction ID: 4E2B92AC1B46B97A74A8 OR Lake Oswego 97034-3057 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Agent Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Spears, Derek, , , Date of Receipt Mailing Address 2021 SW Main St Unit 36 10 12 2018 City State Zip Code Transaction ID: 44198B78D8714939A63D OR Portland 97205-1543 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wilkerson, Emory, , , Date of Receipt Mailing Address 190 Pointer Ridge Trl 14 2018 City State Zip Code Transaction ID: 42FCAB131245B0D4E20E GΑ Fayetteville 30214-7403 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Associate General Counsel State Farm Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) 285.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....